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Leading Quality Addiction Treatment in the Northern Rockies

January 10, 2007

Testimony In Support of the CD Bureau Budget Addictive and Mental Disorders Division

Subcommittee on Appropriations DPPHS

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Good Morning, my name is Mona L. Sumner and I am and have been the Chief Operations Officer at Rimrock Foundation in Billings for the past 40 years. It is time for a paradigm shift in Montana! You will be asked in this session to increase the Corrections budget by over 42%— and you can certainly decide to do that —OR- you can join those of us who are advocating for a paradigm shift in which we stop incarcerating the mentally ill and the addicts and stop looking at Corrections to be treatment centers. As long as we build our jails and our prisons in Montana for the mentally ill and the addicts, there will never be enough beds! Why am I talking about Corrections and incarceration when the issue this morning is the CD Bureau budget proposal? Because that proposal begins the process of a shift in our priorities—wherein we shift funds to community-based treatment providers who are better trained and far more cost effective in treating addiction. The addition of general fund dollars to our community service system is long overdue and will be absolutely crucial to stemming the flow of meth addicts into our corrections system.

The bureau is seeking to establish a system of low cost residential care specifically for those afflicted with methamphetamine addiction and this care will be in our communities where the addicts are and where care is best delivered. California, yes I know how many Montanan's feel about California, but four years ago, Californians said, in a public referendum, no more jails, prisons or public dollars for any kind of incarceration of low level convicted drug addicts and passed Proposition 36. All such drug addicts were put on probation supervision and sent to community treatment facilities serving public patients. Meth is the primary drug of choice in California. We need to take a page out of California's manual. The huge cost savings to California included closure of two prisons due entirely to Proposition 36 and the refusal to incarcerate low level drug addicts. People were shocked at the savings and the outcomes from this policy change and of course they plan to continue with it.

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Montana will never enjoy the benefits of this type of policy change if we don't begin the process now. Did you know that 1 in every 7 Montanan's is in some form of incarceration? How do we think we can afford to continue with a policy of building jails and prisons and pre-release centers to deal with the problem of addiction? I submit we cannot and that if we begin now to put those dollars into community treatment systems, we can effect a paradigm shift.

Programs like drug courts and jail diversion projects such as the one we are operating in Yellowstone County work! The research is clear about the effectiveness of these approaches, yet Montana is still betting on incarceration. I am asking you today to not only fund the Bureau's proposal for general fund dollars to build a residential system of care for severe meth addicts, but to increase those dollars by \$600,000 so that our current state approved programs can establish and expand addiction treatment for our drug courts. Without these funds, none of our existing drug courts can expand and there is not likely to be any new courts established. Federal dollars alone cannot be the only source of investment in Montana's community-based addiction treatment system as they have been for so long. If we want innovation, change, and a paradigm shift, we have to pony up with the funds to make it happen. And I believe Montanan's are ready for this shift in resources.

I would be happy to provide you with information on Proposition 36 and data on the effectiveness of drug courts and other facts upon which to base your decisions on the important issue of addiction in Montana. Please feel free to ask me for this information and please consider these facts in your deliberations this session.